

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>		25	05-30-00
<b>FORMALITY REVIEW</b>			
<b>RESPONSE FORMALITY REVIEW</b>			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	Final	Original	7/10/2000
2	Final	Original	7/10/2000
3	Final	Original	7/10/2000
4	Final	Original	7/10/2000
5	Final	Original	7/10/2000
6	Final	Original	7/10/2000
7	Final	Original	7/10/2000
8	Final	Original	7/10/2000
9	Final	Original	7/10/2000
10	Final	Original	7/10/2000
11	Final	Original	7/10/2000
12	Final	Original	7/10/2000
13	Final	Original	7/10/2000
14	Final	Original	7/10/2000
15	Final	Original	7/10/2000
16	Final	Original	7/10/2000
17	Final	Original	7/10/2000
18	Final	Original	7/10/2000
19	Final	Original	7/10/2000
20	Final	Original	7/10/2000
21	Final	Original	7/10/2000
22	Final	Original	7/10/2000
23	Final	Original	7/10/2000
24	Final	Original	7/10/2000
25	Final	Original	7/10/2000
26	Final	Original	7/10/2000
27	Final	Original	7/10/2000
28	Final	Original	7/10/2000
29	Final	Original	7/10/2000
30	Final	Original	7/10/2000
31	Final	Original	7/10/2000
32	Final	Original	7/10/2000
33	Final	Original	7/10/2000
34	Final	Original	7/10/2000
35	Final	Original	7/10/2000
36	Final	Original	7/10/2000
37	Final	Original	7/10/2000
38	Final	Original	7/10/2000
39	Final	Original	7/10/2000
40	Final	Original	7/10/2000
41	Final	Original	7/10/2000
42	Final	Original	7/10/2000
43	Final	Original	7/10/2000
44	Final	Original	7/10/2000
45	Final	Original	7/10/2000
46	Final	Original	7/10/2000
47	Final	Original	7/10/2000
48	Final	Original	7/10/2000
49	Final	Original	7/10/2000
50	Final	Original	7/10/2000

Claim	Final	Original	Date
51			
52			
53			
54			
55			
56			
57			
58			
59			
60			
61			
62			
63			
64			
65			
66			
67			
68			
69			
70			
71			
72			
73			
74			
75			
76			
77			
78			
79			
80			
81			
82			
83			
84			
85			
86			
87			
88			
89			
90			
91			
92			
93			
94			
95			
96			
97			
98			
99			
100			

Claim	Final	Original	Date
101			
102			
103			
104			
105			
106			
107			
108			
109			
110			
111			
112			
113			
114			
115			
116			
117			
118			
119			
120			
121			
122			
123			
124			
125			
126			
127			
128			
129			
130			
131			
132			
133			
134			
135			
136			
137			
138			
139			
140			
141			
142			
143			
144			
145			
146			
147			
148			
149			
150			

If more than 150 claims or 10 actions  
staple additional sheet here